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IMPACT ON PSYCHOTHERAPY:

3 HEMI-SYNC® CASE HISTORIES

by Dwight Eaton, Ph.D.; James Thomas, Ph.D.

Dr. Eaton provides counseling services in his private clinical psychology practice in Honolulu, Hawaii. He recently became aware of the potential of Hemi-Sync as a therapeutic adjunct and joined the Professional Division in February of 1989. A major objective of Dr. Eaton's application of Hemi-Sync is to "assist in the coming-of-age of the psychotherapeutic process." The following case history represents Dr. Eaton's first experience utilizing Hemi-Sync with a therapy client.

Dr. Thomas is a clinical psychologist in private practice in Oklahoma. He has also served as a consultant to the Ponca City School System as their clinician for 16 years, and to various agencies for the state of Oklahoma. A significant portion of his practice deals with executive managers experiencing stress-related symptoms. Dr. Thomas has been a member of the Professional Division since February 1989.

Case 1: Dr. Eaton

Subject: Female; age 34; single; Black/Hawaiian parentage; health service technician; lifelong resident of Oahu, Hawaii.

Subject first presented to me approximately two years ago. Extremely shy and withdrawn. Poor communication skills. Low self-esteem. Some 70 pounds overweight and physically inactive. No hobbies or interests other than her specialty—dental technician of nine years duration. Exhibited repeated negative response to attempts at induction of altered awareness states.

Following standard testing and evaluation, we initiated a program directed toward communication enhancement and institution of adequately functioning self-esteem.

Early therapy focused on her feelings relative to being of half-Black heritage. Subject held this to be the cause of her lifelong shame and embarrassment. Working on this forum in relation to her attitudes dealing with social isolation, nonparticipation and communication, some significant progress was experienced over the next several months.

Progress with subject was both tentative and time consuming. However, her interest remained positive and steady. Approximately six to nine months into therapy, subject voluntarily disclosed experiencing, by choice, an ITOP (abortion) some nine years previous, the culmination of her single serious sexual involvement. Since then she has elected to live alone,

not date, declares no interest in either sex and has let her gross weight serve as a nonstated deterrent to invitation.

Subsequent to this latest disclosure, rapid progress was made in the area of guilt reduction stemming from her conviction of having had willfully “murdered” a helpless human being. This served to bring about a marked change in the area of ego identification.

Over the next several months, subject’s weight began to drop, skill at voluntary communication was markedly enhanced and evidences of steadily increasing social involvement were indicated.

From then until the present, positive change has been slow but cognizable and functional. However, during the entire course of our time together, subject has been relatively nonresponsive to any number of hypnosis or allied techniques intended to enhance the visualization function.

A number of weeks ago I learned of Robert A. Monroe and The Monroe Institute. I purchased and read a copy of *Far Journeys*. Since then there has been an interesting flow of communication between the Institute and myself. Recently I submitted an application to work with this fantastic group. And, fortunately, was accepted. The Hemi-Sync Synthesizer is here... hooked up... and functioning beautifully.

The subject of this report offered my first opportunity to use Hemi-Sync as the only modus operandi. Details follow.

On this date, 3/16/89, upon entering, subject was made aware of my intended employment of the Hemi-Sync function. Following her approval she was seated in a recliner and moved to a semi-erect position. Prior to the placement of the head-phones, her only instructions were to lie comfortably, arms and legs uncrossed, close the eyes and take a series of deep breaths. Just let the mind wander and experience... whatever you experience. Give yourself permission to store whatever you experience so that you can recall it at will.

With headphones in place (I employed a second set during the initial few minutes), we did the following:

First 5 minutes	Ocean setting
Second 5 minutes	Delta setting
30 minutes	Beta/Theta setting

At the termination of the 40 minutes, the Hemi-Sync was turned off and the headphones lifted away after the subject opened her eyes.

She lay quietly for several minutes—eyes wide and looking about as one just awakened from a restful sleep. She lifted both hands and arms, looking at them curiously as she slowly moved them up and down, smiling broadly.

When I inquired as to this action, she stated that she had been floating for so long it was hard to believe that she was still in the chair. She stated she felt so very good, physically. When I made mention of the possible length of time she had been in this condition, she stated, “Oh... just a few minutes, I guess.” When informed that 40 minutes had elapsed, she was obviously surprised.

I inquired as to whether or not there was anything she wished to share with me. Following, in abbreviated form, is the story that poured from a subject having had such a difficult time with communication and constructive visualization.

She experienced a series of what she called little dreams. Seven of them, in fact. Each seemingly disconnected and disassociated. Until the advent of the seventh dream wherein she was able to make viable connections. From the wellspring of herself she made the following conclusions:

“I guess I’ve been playing a lot of games... at some time you have to stop being the spectator and become a participant... you can’t just stay in the sand and watch... and those awful colors that meant anger and negativity... I used to like being by myself... but that’s so lonely... with nobody around... that gets so boring... and those hostile and angry soldiers... —just like me... and that troubled old lady on the road... and I became that troubled old lady... and the rape... you have to get on the right path to go where you want to go... have to take it by force, if necessary... and that awful hard, bright jolt at the end... and I saw how unforgiving I’ve been... to others and to myself... and what it’s cost me... I’ve been so angry and stupid.”

We spent the next half hour or so talking and reviewing. Both of us are quite pleased with this initial effort.

Two years with a most difficult subject. Or... a counselor who failed in finding the correct combination for this particular subject. And along came Hemi-Sync. On one hand we have a subject patently nonamenable to an extensive “bag of tricks” acquired over a third of a century. On the other, Hemi-Sync and a one-time exposure. The results tend to be startling.

Case 2: Dr. Thomas

A patient in my private practice is in an upper-management position and is responsible for the management of over 75 people. This requires long hours, evening work, and being virtually “on call” 24 hours a day, 7 days a week. After approximately six years of this constant regime, he began using large amounts of alcohol to relieve the stress and to “get away from it all.” This

cycle of stress and self-medication with alcohol began to take its toll and after several near-death experiences, he became a patient of mine.

The initial concern was for the immediate cessation of the alcohol abuse cycle. He was cooperative and willing to use a substitute for the alcohol as long as it would provide “some relief.” The patient was also complaining of headaches, loss of sleep, inability to concentrate and completing a train of thought on a project, and a general feeling of helplessness and being overwhelmed. In conjunction with several sessions I prescribed, initially, the use of the *Concentration* tape. This tape was used first as an adjunct to therapy. The client was given instructions to sit or recline in an easy chair and do nothing except listen to the tape. This routine was followed for about one week and was performed every day in the evening hours with complete silence. He reported a greater ability to concentrate at work and that he was “feeling better.” The next week I instructed the client to utilize the tape with a headset while working on a project. He reported that for the first time in many months he was able to start a project, stay with it, and complete it, even with interruptions. I observed that his demeanor was much improved and that he was quickly beginning to deal with the issues of work contently for the first time in many months.

The client also told me that he no longer needed to use the tape on a daily basis, that it seemed to “realign my thinking” and that he only felt the need to use the tape occasionally and for short periods of time when wanting to get “back in the groove” after an extended weekend. At this time, I also observed that the client was quickly falling back into the workaholic cycle and potential self-abuse. He was aware of this and wanted to remain alcohol-free and to become involved with a program of relieving stress without chemicals. I introduced him to the *Introduction to Focus 10 (Discovery 2)* tape and he began to use it on a daily basis during his lunch hour. This was later replaced, after approximately one week, with the *Catnapper* tape. Prior to the use of the *Introduction to Focus 10* tape, the patient reported that, in the afternoon, he felt agitated and tired easily. When arriving home in the evenings, he was short-tempered and irritable. He reports that he has a feeling of “just arriving at work” after returning from the use of the tape.

I continue to see this individual at his workplace and observe him to be calmer and more efficient with his supervision of personnel and completion of tasks. He has been given the additional supervision of several other departments and projects and has approached and completed these projects without any observed adverse side effects. His spouse reports that she “can tell when he has listened to the tapes” and reports that if he has not been able to that day, she asks him to take time and listen to them when he comes home from work. The patient has been using the *Catnapper* on a daily basis for over a year now and reports improved temperament and no use of alcohol.

Case 3: Dr. Thomas

I have been working with a particular client who has been teaching for the past 16 years as an elementary educator. She is 37 years of age and has a two-year-old son. She came to me complaining that a week before school started, and particularly the night before school started, she was having “severe cramps, headache, diarrhea, nausea and vomiting.” She believed that it was just her “nerves” and that she wanted some help in alleviating these problems which had been occurring for the past 16 years, always one week before the start of school.

In conjunction with the use of imagery and positive suggestion, I asked her to listen to the *Concentration* tape for 45 minutes each day for approximately three days prior to the beginning of the first day of school. Her symptoms were alleviated. On the day before school started, she became very anxious and asked for something “more than this particular tape with ‘words’ on it.” She was given the *Catnapper* tape and listened to it the night before school. The next day she reported to me that all of her symptoms were alleviated. She was amazed that for the first time she did not have diarrhea or the other symptoms she had experienced for the last 16 years.

At the beginning of this school year (1988-89), she called me and I instructed her to use the *Catnapper* tape once in my office and before retiring that night. She reported to me that her symptoms were not present. At a follow-up meeting thirty days later, she was reporting no recurring symptoms.

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